

FOR INSTRUCTIONS, SEE BACK OF FORM

**DISCLOSURE SUMMARY PAGE**

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup> St. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.  
Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

10 ETHICS AND  
2010 JUL 30 AM 11:16

COMMITTEE NAME (Must be same as on Statement of Organization) <u>POTTAWATTAMIE COUNTY DEMOCRATIC CENTRAL COMMITTEE</u>	
IMPORTANT: Indicate by # type of committee you are reporting for: <u>4</u> (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue	
CANDIDATE COMMITTEES ONLY:	
Candidate Name _____	Political Party (if applicable) _____
Office Sought _____	District (if Senate or House) _____

FORM <b>DR-2</b> (Rev. 12/2009)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	<u>9157</u>
Logged In <u>S</u>	_____
Scanned _____	_____
Computer _____	_____
Audited _____	_____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Boyd Pierre Thomsen  
SIGNATURE OF PERSON FILING REPORT

212-435-9767  
TELEPHONE

7/30/2010  
DATE SIGNED

I AM FILING A \_\_\_\_\_ REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by # ☐

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

**STATEMENT OF CASH ON HAND**

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) \_\_\_\_\_ \$

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) \_\_\_\_\_

Schedule F: Loans Received total (Attach Schedule F) \_\_\_\_\_

Schedule H: Total Sales of Campaign Property (Attach Schedule H) \_\_\_\_\_

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \_\_\_\_\_ \$

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) \_\_\_\_\_

Schedule F: Loan Repayments total (Attach Schedule F) \_\_\_\_\_

CASH ON HAND at the end of this reporting period (if final report balance must be zero) \_\_\_\_\_ \$

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D) \_\_\_\_\_ \$

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \_\_\_\_\_ \$

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \_\_\_\_\_ \$

CONSULTANT BREAKDOWN (Schedule G Attached?) \_\_\_\_\_ YES \_\_\_\_\_ NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \_\_\_\_\_ \$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

8626.81

145.00

8,771.81

3,147.51

5,624.30

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME (Must be same as on Statement of Organization)**POTTAWATTAMIE COUNTY  
DEMOCRATIC CENTRAL COMMITTEE**SCHEDULE****A**  
(Rev. 07/03)**MONEY  
RECEIPTS**☐ CHECK THIS BOX IF  
AMENDING FORM

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
05/15/10	ID# CK#	SUSTAINING CLUB MONTHLY DONATION EMILY SUE LOTT 1020 N 26TH ST, CB IA 51501		\$ 5.00	<input type="checkbox"/>
11	ID# CK#	SUSTAINING CLUB MONTHLY DONATION ED BRENNER 1232 PARNAMENT AVE, CB IA 51503		10.00	<input type="checkbox"/>
11	ID# CK#	SUSTAINING CLUB MONTHLY DONATION JOAN HANTWELL 19806 29TH ST, MCGLENN IA 51548		10.00	<input type="checkbox"/>
11	ID# CK#	SUSTAINING CLUB MONTHLY DONATION JERRY & RUSSELL ZELMAN 21613 27TH ST, MCGLENN IA 51548		10.00	<input type="checkbox"/>
11	ID# CK#	SUSTAINING CLUB MONTHLY DONATION SUE AKER 20408 Honeycreek Rd, CB IA 51503		25.00	<input type="checkbox"/>
05/17/10	ID# CK#	SUSTAINING CLUB DONATION Tom WOODEN 28 CANNING ST, CB IA 51501		25.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 85.00	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2  
(for Schedule A)

For Instructions, See Back of Form

Receipt Form

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

## CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

POTTAWATTAMIE COUNTY  
DEMOCRATIC CENTRAL COMMITTEE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(5), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
06/15/10 05/11/12	ID# CHK#	SUSTAINABLE CLUB MONTHLY EMILY SUE LETT 1020 N 26TH ST, CO IA 51501	DONATION	\$ 5.00	<input type="checkbox"/>
11	ID# CHK#	SUSTAINABLE CLUB MONTHLY ED BARNHART 1232 POTTAWATTAMIE AVE CO IA 51503	DONATION	10.00	<input type="checkbox"/>
11	ID# CHK#	SUSTAINABLE CLUB MONTHLY JEAN HARTWELL 19806 24TH ST, McCLELLAN IA 51548	DONATION	10.00	<input type="checkbox"/>
11	ID# CHK#	SUSTAINABLE CLUB MONTHLY JERRY & RUSSELL ZELUMEN 24193 270TH ST, McClelland IA 51548	DONATION	10.00	<input type="checkbox"/>
11	ID# CHK#	SUSTAINABLE CLUB MONTHLY SUE AKRAI 20408 Honeycreek Rd CO IA 51503	DONATION	25.00	<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>

SUB-TOTAL

\$ 60.00

TOTAL (if last page of this schedule)

\$ 145.00

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

POTTAWATTAMIE COUNTY  
DEMOCRATIC CENTRAL COMMITTEE

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
05/27/10	ID# CK# 1064	KYPPA + JON LLC c/o DR. DAVID WYMAN 808 Ironwood Ct, Cedar Rapids	HEADQUARTERS RENTAL	\$ 900.00
05/27/10	ID# CK# 1065	COUNCIL BLUFFS COMMUNITY SCHOOL PRINCIPAL 12 SCOTT ST CO, IA 51503	COUNTY CONVENTION SCHOOL RENTAL & CATERING	394.00
06/05/10	ID# CK# 1066	BOTH WILSON 311 Woodbury Ave Council Bluffs, IA 51503	REIMBURSEMENT FOR SUPPLIES	26.42
06/05/10	ID# CK# 1067	BONNIE LEIDENHEIMER 112 BEAL ST Council Bluffs, IA 51503	MEMBER TIPS RECOGNITION PLAQUE REIMBURSEMENT	<del>25.00</del> 50.00
06/01/10 06/30/10	ID# CK# —	COUNCIL BLUFFS SAVINGS BANK 1751 MADISON AVE Council Bluffs, IA 51503	AUTOMATED CLEARINGHOUSE FEE	10.00 10.00
07/01/10	ID# CK# 1068	MID AMERICAN ENERGY P.O. Box 8020 Davenport, IA 52802-8020	UTILITY FOR HEADQUARTERS BUILDING	1.46
07/01/10	ID# CK# 1069	BLACK HILLS ENERGY P.O. Box 4660 Cedar Rapids, IA 52401-9746	" " "	87.59
07/11/10	ID# CK# 1070	RON PERCIE 4317 COTTAGE ROW Council Bluffs, IA 51503	REIMBURSEMENT FOR FAIR BOOTH RENTAL	170.00
SUB-TOTAL				\$ 1649.47
TOTAL (If last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detailed on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

POTTAWATTAMIE COUNTY  
DEMOCRATIC CENTRAL COMMITTEE

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
07/01/10	ID# CK# 1071	KUPPA & SON LLC c/o DR. DAVID KUPPA POB INWOOD CT, IA 52042	HEADQUARTERS RENTAL July 2010	\$ 900.00
07/10/10	ID# CK# 1072	MID AMERICA EMPLOYERS PO BOX 8020 DRYDEN POST, IA 52008-8020	UTILITIES FOR HEADQUARTERS BLOG	223.04
07/10/10	ID# CK# 1073	THE CONGRESSIONAL INFORMATION COMPANY PO BOX 145620, CINCINNATI, OH 45250-5620	INSURANCE FOR HEADQUARTERS	375.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1498.04
TOTAL (If last page of this schedule)				\$ 3142.51

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(b).)

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(for Schedule B)